



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



CONFIRMATION NO. 6460

Bib Data Sheet

SERIAL NUMBER 10/787,516	FILING DATE 02/26/2004  RULE	CLASS 378	GROUP ART UNIT 2882	ATTORNEY DOCKET NO. 10544-288
-----------------------------	---------------------------------------	--------------	------------------------	----------------------------------

APPLICANTS

Boris Verman, Bloomfield, MI;  
 Licai Jiang, Rochester Hills, MI;

\*\* CONTINUING DATA \*\*\*\*\*  
 This appln claims benefit of 60/451,118 02/28/2003 *OK OK*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 05/17/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 3	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <div style="display: flex; justify-content: space-between;"> <div> <i>[Signature]</i>            Examiner's Signature         </div> <div> <i>[Initials]</i>            Initials         </div> </div>				

ADDRESS  
 John M. Card  
 BRINKS HOFER GILSON & LIONE  
 P.O. Box 10395  
 Chicago, IL  
 60610

TITLE  
 X-ray optical system with adjustable convergence

FILING FEE  RECEIVED 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---